

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	<b>214509151</b>						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: <b>LEA+ELLIOTT, INC.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>PHILIP C CASTELLANA 44965 AVIATION DR STE 290 DULLES, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>LOUDOUN COUNTY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION: <b>DE</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>3/31/2014</b></p> <p>SCC ID NO: <b>F1034414</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>20,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	20,000		
CLASS	AUTHORIZED							
COMMON	20,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 44965 AVIATION DR STE 290</p> <p style="text-align: center;">CITY/ST/ZIP: DULLES, VA 20166</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 25%; text-align: center;"> <input checked="" type="checkbox"/> OFFICER         </td> <td style="width: 25%; text-align: center;"> <input type="checkbox"/> DIRECTOR         </td> </tr> <tr> <td>           NAME: JOHN J NORTON            TITLE: PRESIDENT            ADDRESS: 6304 Westcoat Dr            CITY/ST/ZIP/CO: COLLEYVILLE, TX 76034         </td> <td colspan="2"></td> </tr> </table>				<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	NAME: JOHN J NORTON TITLE: PRESIDENT ADDRESS: 6304 Westcoat Dr CITY/ST/ZIP/CO: COLLEYVILLE, TX 76034		
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	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR						
NAME: ROBERT W FALVEY TITLE: SECRETARY ADDRESS: 1940 Lake Robert Ct CITY/ST/ZIP/CO: Windemere, FL 34786								

NAME:	DIANE WOODEND JONES	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	3715 MOCKINGBIRD LANE		
CITY/ST/ZIP/CO:	DALLAS, TX 75205		
NAME:	Theodore C. Barker	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2149 South Joliet Ct.		
CITY/ST/ZIP/CO:	Aurora, CO 80014		
NAME:	David M. Casselman	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2401 Southbrook Ct		
CITY/ST/ZIP/CO:	Arlington, TX 76006		
NAME:	John C. Graddy	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	815 Daniieldale Rd		
CITY/ST/ZIP/CO:	Duncanville, TX 75137		
NAME:	Russell E. Green	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	40202 Browns Creek Pl.		
CITY/ST/ZIP/CO:	Leesburg, VA 20175		
NAME:	John E. Joy	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	2400 Summit View Dr		
CITY/ST/ZIP/CO:	Bedford, TX 76021		
NAME:	Gordon J. Kennedy	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	109 Windwalker Way		
CITY/ST/ZIP/CO:	Novato, CA 94945		
NAME:	David D. Little	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1717 Barton St.		
CITY/ST/ZIP/CO:	Arlington, VA 22201		
NAME:	Daniel J. McFadden	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9280 NE 12th Ave.		
CITY/ST/ZIP/CO:	Miami, FL 33138		
NAME:	Kamel-Eddine Mokhtech	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	11276 NW 47th Ln		
CITY/ST/ZIP/CO:	Doral, FL 33178		
NAME:	Steven L. Perliss	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	115 3rd Ave		
CITY/ST/ZIP/CO:	San Francisco, CA 94118		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Sanjeev N. Shah VICE PRESIDENT 621 Tibidabo Ave Coral Gables, FL 33143	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Ronald E. Sheahan VICE PRESIDENT 26314 N 50th DR Phoenix, AZ 85083	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Cynthia R. Sugimoto VICE PRESIDENT 21111 Marshallfield Ln Redondo Beach, CA 90278	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ MONA L HAYFORD		MONA L HAYFORD, T/D		2/20/2014	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					